

DEPOSIT ACCOUNT CHARGE

CONTINUATION-IN-PART APPLICATION UNDER 37 C.F.R. 53(b) TRANSMITTAL DOCUMENT

17058 U.S. PRO
10/672757
09/26/03

To: COMMISSIONER FOR PATENTS
Mail Stop PATENT APPLICATION
Arlington, VA 22313

Dkt. No.: BUSEJ-P03
Art Unit: 3724
Examiner: Not Assigned

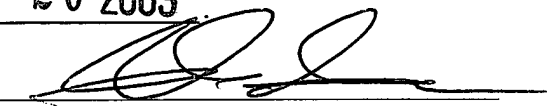
TITLE: DUST-CAPTURING DEVICE FOR A SAW

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"Express Mail" mailing label number EL963913627US.

I hereby certify that this correspondence is addressed to the Commissioner for Patents, Arlington, VA 22313, and is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on SEP 26 2003

Dated: SEP 26 2003


FRANK G. MORKUNAS

CORRESPONDENCE ADDRESS:

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Cust. No.: 23,653



23653

PATENT TRADEMARK OFFICE

1. This is a request for filing a continuation-in-part application which claims the benefit of the following pending prior application(s):

Non-provisional application no. 10/147,128, filed on May 15, 2002, entitled DEBRIS-COLLECTION DEVICE FOR A POWER SAW.

2. The first-named inventor is: John P. Buser.

3. Applicant claims **SMALL ENTITY STATUS** under 37 CFR 1.9 & 37 CFR 1.27.

4. **NON-PUBLICATION OF APPLICATION:** This invention has not and will not be the subject of a patent application in another country or under a multilateral international agreement that requires publication of applications eighteen (18) months after filing; and applicant requests that this application not be published.

5. The issue fee has not been tendered, nor has there been an abandonment, or termination, of proceedings in the above-identified prior application.

6. Enclosed with this application are:

- a. 20 pages of specification (including cover sheet, claims[s], drawing[s], and abstract).
- b. 12 numbered claim[s].
- c. 1 page of abstract.
- d. 2 sheet[s] of formal drawings.
- e. Combined Declaration and Power of Attorney.

f. Information Disclosure Statement.

g. A Return Postcard Receipt has been enclosed with this transmittal.

7. The filing fee is calculated below:

	No. Filed	Minus	No. Extra	X	Sm. Ent. Rate	Oth. Ent. Rate	=	Sm.Ent. Fee	Oth.Ent. Fee
Total Claims		- 20		x	\$ 9	\$ 18		\$	\$
No. Independent Claims		- 3		x	\$ 42	\$ 84		\$	\$
Multiple Dep. Claims Presented: ___ Yes / <u>x</u> No					\$140	\$280		\$	\$
					BASIC FEE			\$375	\$
					TOTAL FEE			\$375	\$

8. **Deposit Account Charge.** The Commissioner is hereby authorized to charge fees under 37 C.F.R. 1.16 and 1.17, and any other payment deficiency, which may be required, or credit any overpayment to Deposit Account No. 50-0382. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: SEP 26 2003


Frank G. Morkunas, Reg. No. 38,974